

# Scholarship Application

## DC AMTA

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone number(s): \_\_\_\_\_

Class/workshop and Date: \_\_\_\_\_

Why do you want to take this particular class/workshop? How does it relate to your career goals in massage therapy?

Why do you need this scholarship? Summarize your current financial situation.

Does this class/workshop meet the continuing education requirements needed for re-certification by NCTMB & AMTA?	Are you willing to write a 500 word article about your training of the newsletter? (This is primary condition to be met to receive a scholarship.)
<input type="checkbox"/> Yes	<input type="checkbox"/> Yes
<input type="checkbox"/> No	<input type="checkbox"/> No

You must submit your article to the newsletter editor within 3 weeks of completion of the training.

If you have received a scholarship, you are not eligible for a scholarship the next 2 years.

You must be an AMTA DC member to qualify for this scholarship.

You must register for the training, then AMTA DC will reimburse you up to \$400.00 upon submission of your receipt.

Mail to: AMTA-DC 5505 Connecticut Ave #356 Washington, DC 20015 or bring to any meeting